· CARTINE		DOIAIES		0147 11	0005 0070	+
A 1 140/	SECURITIES AND EX		MIŞSION	OMB Number	3235-0076	1
1072648	Washingto	n, D.C 20549			August 31, 1998	
	50			Estimated ave		
		RM D	EIVED (nours per resp	onse 16.00	١
RECE				<u> </u>		_
<i>[S]</i>	NOTICE OF SAL	E OF SECURITI	ES 2002		USE ONLY	1
2 Jun 2	4 2002 PURSUANT TO			Prefix	Serial	
		(6), AND OR		200		4
	AND DAG TRACTED		75/18/N A		THE PERSON NAMED IN	1
* PC 1	55 SAFORWILIMITED	OFFERING EXE	MATION			J
Name of Offering (check if thi	s is an amendment and name has chi	anged, and indicate ch	ange.)		III IIII IIII IIII III III III	_
ALM T	WRBINE INC			Millian me	48072 _	
Filing Under (Check box(es) that a		☑ Rule 506 🗆	Section 4(6)	020	400.	-
Type of Filing: New Filing	mendment	•				
		DENTIFICATION I	DATA			
1. Enter the information requested a	bout the issuer					
Name of Issuer (check if this	is an amendment and name has char TURBINE, INC.	iged, and indicate char	ige.)		•	
	ber and Street, City, State, Zip Code)		Teleph	one Number (Inc	cluding Area Code	<u> </u>
920 LST., NW, STE	. GOL WASHINGT	ON, DC 200	36 (202)778-8	538, X13	2
	ations (Number and Street, City, Sta			one Number (In	cluding Area Code)
(if different from Executive Offices				·		
Brief Description of Business	REINE WI RECUPE	JELOPMEN	TOFA	FUNCT	ONAL. 1	W A
EFFICIENT GAS TO	RBINE WI REZUPE	RATOR FOR	SMALL	to medi	UM. 17ED	
POWER GENERAT	ION AND CIVILIA	n VEHICUC	AK AP	PLICATI	ONS.	
Type of Business Organization			•			
corporation	limited partnership, already f		. D other (pl	ease specify):		
□ business trust	☐ limited partnership, to be for				DDAAFOO	
Associate Follows AB as a CT		Month	Year	/	PROCESS)EL
Actual or Estimated Date of Incorp		الماحا		Actual D E		
Jurisdiction of Incorporation of Or	ganization: (Enter two-letter U.S. P	ostal Service apprevia		·	JUL 1920	UZ
	CN for Canada; FN for o	other foreign jurisdicti	on) DE		7.10	
GENERAL INSTRUCTIONS					FINANCIA	
Federal:					FINANCIA	-
Who Must File: All issuers making an	offering of securities in reliance on an ex	emption under Regulation	n D or Section 4(6), 17 CFR 230.50	D1 et seq. or 15 U.S	.c.
77d(6).			·	•	•	

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address,

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 2054'

Copies Required: Five (5), copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice consistues a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OTVIB control number.

SEC 1972 (2-97) 1 of 8

 Each promoter of the issuer, i 	if the issuer has been orga	anized within the past five	years:	•
 Each beneficial owner having t securities of the issuer; 	the power to yote or dispo	ose, or direct the vote or d	isposition of, 10%	or more of a class of equit
• Each executive officer and dire	ector of corporate issuers a	and of corporate general an	d managing partne	rs of partnership issuers: and
· Each general and managing pa				
Check Box(es) that Apply: Pron	noter 🗆 Beneficial Ou	net 🗆 Executive Offic	er 🗆 Director	☐ General and/or Managing Partner
ull Name (Last name first, if individ ROSADO, RICH)		•		
	mber and Street, City, St	are, Zip Code)	·	· · · · · · · · · · · · · · · · · · ·
2194 SCHLEY A	VE. , BRON	X. NEW YOR	K 10465	•
heck Box(es) that Apply: 19 Pron	noter:	mer 🗆 Executive Office		Central and/or Managing Partner
ull Name (Last name first, if individ	dual)			
BIANCHI: MAR	K		· ·	
Jusiness or Residence Address: (Nu	unber and Street, City, St	ste, Zip Code)		
204 KINGHORI	N ST. STAT	EN ISLAND,	NY 1031.	ર
Check Box(es) that Apply: From	moter	vner Executive Office	er 🗆 Director	☐ General and/or Managing Partner
Full Name (Last name first, if indivi-	dual)		,	
TOLAN, EDW				
	umber and Street, City, St			
234 BEECH	126TH ST.	BELLE HAR	BON, NY	11694
Check Box(cs) that Apply: Pro	morer 5 Beneficial Ov	THE EXECUTIVE OFFICE	er 🖾 Disector	☐ General and/or Managing Partner
Full Name (Last name first, if indivi	dual)			
KALIN MARTI		and the second second	<u></u>	
	umber and Street, City, S	The state of the s		
		ngton, oc 2		
Check Box(es) that Apply: Pro		wner S/Executive Offic	cer 🖸 Director	☐ General and/or Managing Partner
Full Name (Last name first, if indivi	•			
RAKHMAILOU				
Business or Residence Address (N	· · · · · · · · · · · · · · · · · · ·			
3027 CAM IN	NTO AKEND	SO, SAND	(EGO, C)	92117
Check Box(es) that Apply: Pro	omoter M Beneficial O	wner Y Executive Offic	Director	General and/or Managing Partner
Full Name (Last name first, if indiv MORKELS BRIA		yn S		
	fumber and Street, City, S	itate: Zip Code)	8	
912 QUEEN ST		•	2314.	
Check Box(es) that Apply: Pro			cer 🗆 Director	O General and/or Managing Partner
Full Name (Last name first, if indiv	ridual)			•
Full Name (Last name first, if indiv SHEBSHAEVI		6		
SHEBSHAEVI Business or Residence Address (N	CH LEONI Sumber and Street, City, S	State, Zip Code)		
SHEBSHAEVI	CH LEONI Sumber and Street, City, S	State, Zip Code)	Ac, MO	20854

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

	, ,	•	Contract to the second	B. I.	FORMA	HON AB	OUT OFFI	RING	3.00				
i. Has th	e issuer so	id, or doe	s the issu	er intend t	o séll, to	non-accre	dited invest	tors in this	offering?			Yes 🗆	No
			Ans	wer also in	Appendi	x, Colum	a 2, if filin	g under U	LOE.			•	
2. What	is the mini	mum inve	*		,		:	-				.5	000
	- VIII-			WILL 50 V						• • • • • • • • • •	•••••		
	he offering			•							• • • • • • • • •	Yes	20
sion or to be l list the	the informate is a similar resisted is an an an an an an aller, you m	nuneració: essociated he broker	n for solici I person or or dealer.	tation of p ragent of : . If more t	urchasers a broker c han five (in connect of dealer ro 5) persons	ion with sa gistered wi to be lister	les of secur ith the SEC d are assoc	ities in the and/or w	offering, i	lf a person		
Full Name	(Last name	first, if i	ndividual)	+				•					
	RACO	NA	101/1	UARI)		•				`		•
Business or	Residence	Address (Number a	and Street.	City, Sta	te, Zip Co	ode)						
• .	219	45	CHUE	CY A	VE.	BRO	NX,	NEV	v 408	राद	1046	5	
Name of A	ssociated E	roker or	Dealer										
	REA	VBLI	6 E	OUIT	EC	OF	AME	RICA	U	~	•		
States in W										· · · ·	·····		,
(Check "	'All States'	or check	c individu	al States) .					- 			□ All S	States
[AL]		[AZ]	•	(C)x()	[CO],	[CT]	[DE]	(DC)	[RE]	[Char!	(H1)	(ai)	
[IL]			KX	[KY]	[Lar]	[ME]	[MD]	[MA]	[MI]		[MS]	[MC]	
[MT]	•	[NV]		[NJ]		(NX)	[NC]	[ND]	- •		[OR]	[PA]	-
[RI]			[TN]	[TXX]		-	[VA]	(1114)	(WV)	[WI]	[WY]	PR	-
Full Name													
	•									•			
Business of	r Residence	M CH Address	(Number	MAR and Street	. Cîty, Sta	ne. Zip C	ode)			· · · · · · · · · · · · · · · · · · ·			
•	70	4 1/	. 41 / 6	1-12 n	3 G		T 10 +-	-AI T	SI AV	ND A	111	בחו	()
Name of A	Associated)	Broker or	Dealer	IUKI	7 31.	1. 3	TATE	-14 1-	J ()	1	<u> </u>	103	<u>``</u>
				FOU	TIE	ره ع:	FAI	MERI	cA,	40.	•		
States in V	Which Perso	on Listed	Has Solic	ited or Int	ends to So	licit Purc	hasers						
(Check	"All States	" or chec	k individu	al States)									States
[AL]	[AK]	[AZ]	[AR]	(CX)	[08]	[(37]	[DE]	[ÞĊ]	[FV]	[OX)	[HV]	[ID]
	[IN/	[]A]	[KS]	[KY/]	[LA]	[ME]	[MD]	MA	[MV]	[MN]	[MS]	[MC)]
[MT]	[NE]	[NV]	[NH]	[NV]	[NM]	[NW]	INE	[ND]	[ON]	[0]	[OR]	[PA	
[RI]	[SC]	[SD]	[TN]	[702]	[UT]	[VT]	[VA]	[WA]	[WV]	[W/	[WY]	[PR	1]
Full Name	(Last nan	e first, if	individua	1)									
	TOLA	N, E	EDWA	RD		**							
Business o	r Residenc	e Address	(Number	and Street	, City, St	ate, Zip C	ode)						
	234		ECH	126	TH S	Τ	BELL	EH	4 RBC	RIN	4 1	169	4_
Name of .	Associated	Broker or	Dealer									,	
•	REF	SUB LI	LE	OB 4 14	IRS C	SE A	MER	ICA	LTD	•			
States in '	Which Pers												
	"All States				,							□ All	States
[AN]	[AK]	[AZ]	[AR]	[34]	1001	[01]	DEL	[DC]	[FY]	[GM]	[HI]	(10	
[116]	[IN]	[IA]	[KS]	[KY]	[LA]		[MØ]	[MM]	[MI]	[MN]	[MS]	[MC	
[MT]	[NE]	[NV]	[HM]	[Ne]	[NM]	[NY]	. [NO]		[OM]	[OK!]	[OR]	[. P %	K
[RI]	[SC]	[SD]	[TN]	[TX	[UT]	[VT]	[Vxv]	[W/M]	[WV]	[WL	[WY]	(PR	Ł]

..., FLUNIDER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero". If the transaction is an exchange offer-	• •	
"ing, check this box I and indicate in the column below the amounts of the securities of-		•
fered for exchange and already exchanged.		
Type of Security	Aggregate Offering Price	Amount Already Sold
Debt.,	\$	\$
Equity. (Canvertible)	s4,750,000	\$667,922,25
□ Common ▶ Preferred		, ,
Convertible Securities (including warrants)	\$	\$
Partnership Interests		\$
Other (Specify)	\$	\$
Total	s 4,750,000	\$ 667,822,25
Answer also in Appendix, Column 3, if filing under ULOE		
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	,	
	Number	Aggregate
	Investors	Dollar Amount of Purchases
Accredited Investors	16	s_667, P22.25
Non-accredited Investors.		S
Total (for filings under Rule 504 only)		\$
Answer also in Appendix, Column 4, if filing under ULOE		***************************************
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of offering		Dollar Amount
	Security	Sold
Rule 505		\$
Regulation A		. S
Rule 504		<u> </u>
Total:	•	. \$
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of a expenditure is not known, furnish an estimate and check the box to the left of the estimate.	e .	
Transfer Agent's Fees	П	\$
Printing and Engraving Costs.		s 500
		s 3,000
Legal Fees.		5 3,000
Accounting Fees		5
Engineering Fees		S
Sales Commissions (Specify finder's fees separately)		s 475,000
Other Expenses (identify) NON-ACCOUNTABLE BANKING F	eel A	s 142,500
Total	œ⁄	s 621,000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES	AND USE OF PROCEEDS
b. Enter the difference between the aggregate offering price given in response to Part C-Question 1 and total expenses furnished in response to Part C-Question 4.a. This difference is the "adjusted gross proceeds to the issuer."	\$ 4,129,000
5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C-Question 4.b. above.	
	Payments to Officers, Directors, & Payments To
Salaries and fees	Affiliates Others
Purchase of real estate.	\$ D \$
Purchase, rental or leasing and installation of machinery and equipment	\$ © \$
Construction or leasing of plant buildings and facilities	\$ D \$
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger	s
Repayment of indebtedness. Working capital: Other (specify) FARICATION OF THE TEST RIG EX	\$ 300,000 a s
AND REMAINING PROTOTYPE PARTS TEST	
PROGRAM CONSULTING PURSUE PASTATE Column Totals. COLUMN TOTALS.	s = s s_750,000 x/s_3,379,000
Total Payments Listed (column totals added)	
D. FEDERAL SIGNATURE	
The issuer has duly caused this notice to be signed by the undersigned duly authorized person following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities request of its staff, the information furnished by the issuer to any non-accredited investor pursu	and Exchange Commission, upon written
Issuer (Print or Type) ALM TURBINE INC Signature	Date 6.17.02
Name of Signer (Print or Type) Title of Signer (Print or Type) SR. VILE PRE	ESIDENT

ATTENTION

₹.	. 5	TX	T	E'Q'	N 4	ITE	DE	*

1. Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions. Yes No of such rule?

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print of Type) ALM TURBINE, INC.	Signature	Date 6.17.02
BRIAN R. MORRIS	Title (Print or Type) SR. VICE PRESIDENT	

Instructions

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or becar typed or printed signatures.

1			3			4	;			5
	non-acc invest St	tend to sell to on-accredited investors in State Offered in state Oracle (Part C-Item 1) Type of security and aggregate Type of investor and amound purchased in State (Part C-Item 2)						Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	SERIES A CONVERTIBLE PREFERRED	Number of Accredited Investors		Numb Nonacci Inves	redited	_Amount	Yes	No
AL		0				(
AK		1		•				,		
AZ				1						
AR							•			
CA			44.750.000	1	\$25,000					
CO.						,				
CT										
DE										
DC										
FL							<u>.</u>			
GA						,				
HI										
\mathbf{m}										
IL			144,750,000	1	\$12,500					
IN										
IA			54,750,000	l	\$6,250	·				
KS										
KY			\$4,750,000		\$20,000)				
LA										
ME										
MD										
MA			54,750,000	12	\$510,00	<u>d</u>				
MI										
MN			54,750,000		\$25,00	7				
MS					_		·			
MC)	V	\$ 4,750,000	1	\$25,00	0				V

1.4	. 2	2	3		···	4				5	7
	Intend	to sell					ification State	1			
		0 .	Type of security		• , •		•		ULOE (if yes,		
,		credited								ach	
		ors in ate	offering price offered in state		Type of amound pu	investor				ation of granted)	
}.	(Part B					C-Item				-Item 1)	
		٠,	SONIES A						,,		7
			CONVERTIBLE	Number of		Numb	1	•			
State	Yes	No	CONVERTIBLE PREFERRED	Accredited Investors		Nonacci Inves		Amount	Yes	No	
MT		0				()				
NE								·			
NV				·							
NH											
NJ	ļ <u></u>		\$4750,000	1	\$12,0027						
NM			5475000	-	\$25,000						
NY			14,750,000	1 .	\$12,500	·					
NC			154,750,000	1 1	460,000						
ND		1						<u> </u>			
OH										4	
OK	1							<u> </u>			
OR		11									
PA		1	54,750,000	<u> </u>	\$ 25,000	·					
RI											
SC											
SD			·								
TN			/		1						
TX			000,075,42	1 1	\$20875	<u> </u>					
UT											
VT					_						
VA					<u> </u>	1.					
WA		_		-	<u> </u>			<u> </u>	<u> </u>		_
WV		- 	- 		<u> </u>	-			-		
WI					_				 		_
WY						-	1		-		_
PR		V	<u> </u>	<u></u>		<u></u>	A	·	1	A	